

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

MAKE AMERICA AWESOME

ADDRESS (number and street) ▼

PO BOX 26141

☐ Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22313

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00594176

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
03 01 2016

through

M M M / D D D / Y Y Y Y Y Y  
03 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Chris Marston

Signature of Treasurer

Chris Marston

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
04 20 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MAKE AMERICA AWESOME

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 03 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y  
 03 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		1711.77
(b) Cash on Hand at Beginning of Reporting Period.....	14811.65	
(c) Total Receipts (from Line 19) .....	12036.55	31013.55
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	26848.20	32725.32
7. Total Disbursements (from Line 31) .....	1981.88	7859.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	24866.32	24866.32
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	19504.54	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**MAKE AMERICA AWESOME**

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2016

To:

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2016

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

9480.00

15480.00

(ii) Unitemized .....

2540.00

15517.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

12020.00

30997.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

12020.00

30997.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

16.55

16.55

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

12036.55

31013.55

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

12036.55

31013.55

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1431.88	2587.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1431.88	2587.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	4721.60
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	550.00	550.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	550.00	550.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1981.88	7859.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1981.88	7859.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	12020.00	30997.00
34. Total Contribution Refunds (from Line 28(d)) .....	550.00	550.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11470.00	30447.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	1431.88	2587.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	16.55	16.55
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	1415.33	2570.85

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MAKE AMERICA AWESOME**

Full Name (Last, First, Middle Initial)

## **A. Paul Bailey**

Mailing Address 416 S 17th St

City

Mattoon

State

IL

Zip Code

61938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Preston Hunter

Occupation

IT Consulting

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

Transaction ID : SA11AI.4638

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Richard Blumenstein**

Mailing Address 32400 Telegraph Rd  
Ste 205

City

Bingham Farms

State

MI

Zip Code

48025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Real Estate

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

Transaction ID : SA11AI.4636

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Wesley Brodsky**

Mailing Address 247 High St

City

Medford

State

ME

Zip Code

02155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WesBrodsky Wireless Communicat

Occupation

Consulting

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11AI.4608

Amount of Each Receipt this Period

480.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3230.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MAKE AMERICA AWESOME**

Full Name (Last, First, Middle Initial)

## **A. Robert Collins**

Mailing Address 220 W 64th St

City State Zip Code  
 Indianapolis IN 46260

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eli Lilly & Co

Occupation

Pharmaceuticals

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

Transaction ID : SA11AI.4640

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Allison Hayward**

Mailing Address 2215 Madison St

City State Zip Code  
 Cambria CA 93428

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

Transaction ID : SA11AI.4639

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. John Mandler**

Mailing Address 8 Undercliff Ter

City State Zip Code  
 West Orange NJ 07052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mandel Katz & Brosnan

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2016

Transaction ID : SA11AI.4642

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MAKE AMERICA AWESOME**

Full Name (Last, First, Middle Initial)

## **A. Jonathan Perle**

Mailing Address 63 E 79th St

City  
New York

State Zip Code  
NY 10075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2016

Transaction ID : SA11AI.4644

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Matt Savino**

Mailing Address 906 Camino Real  
Apt 202

City  
Redondo Beach

State Zip Code  
CA 90277

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

AT&T

IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2016

Transaction ID : SA11AI.4646

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. John Tabin**

Mailing Address 1315 W St NW  
Apt 243

City  
Washington

State Zip Code  
DC 20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11AI.4634

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5500.00

9480.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 20

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MAKE AMERICA AWESOME**

Full Name (Last, First, Middle Initial)

**A. Election CFO LLC**

Mailing Address PO Box 26141

City  
AlexandriaState  
VAZip Code  
22313Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03                  21                  2016
**Transaction ID : SB21B.4610**

Amount of Each Disbursement this Period

1079.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PayPal**

Mailing Address 2211 N First St

City  
San JoseState  
CAZip Code  
95131Purpose of Disbursement  
CC Processing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03                  31                  2016
**Transaction ID : SB21B.4631**

Amount of Each Disbursement this Period

352.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1431.88

1431.88

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MAKE AMERICA AWESOME**

Full Name (Last, First, Middle Initial)

**A. Adam Twardzik**

Mailing Address 660 9th St SW

City  
WashingtonState  
DCZip Code  
20024

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2016

**Transaction ID : SB28A.4648**

Amount of Each Disbursement this Period

500.00
--------

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

500.00
--------

500.00
--------

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 11 OF 20

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**MAKE AMERICA AWESOME**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Liz Mair**

Nature of Debt (Purpose):

Advance for Independent Expenditures (NH)  
(See Memo Entires on Sch. E)Mailing Address 1200 Nash St  
Ste 247City State Zip Code  
Arlington VA 22209

Outstanding Balance Beginning This Period

6258.55

Transaction ID : SD10.4538

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6258.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Liz Mair**

Nature of Debt (Purpose):

Advances for Non-IE Expenditures

Mailing Address 1200 Nash St  
Ste 247City State Zip Code  
Arlington VA 22209

Outstanding Balance Beginning This Period

26.31

Transaction ID : SD10.4537

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

26.31

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Liz Mair**

Nature of Debt (Purpose):

Advance for Independent Expenditures (NV)  
(See Memo Entires on Sch. E)Mailing Address 1200 Nash St  
Ste 247City State Zip Code  
Arlington VA 22209

Outstanding Balance Beginning This Period

5256.53

Transaction ID : SD10.4556

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5256.53

1) **SUBTOTALS** This Period This Page (optional)..... ►

11541.39

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 12 OF 20

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**MAKE AMERICA AWESOME**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Liz Mair**

Nature of Debt (Purpose):

Advance for Independent Expenditures (VA)  
(See Memo Entries on Sch. E)Mailing Address 1200 Nash St  
Ste 247City State Zip Code  
Arlington VA 22209

Outstanding Balance Beginning This Period

949.35

Transaction ID : SD10.4557

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

949.35

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Liz Mair**

Nature of Debt (Purpose):

Advance for Independent Expenditures (3/15  
Primaries) (See Sch. E Memo Entries)Mailing Address 1200 Nash St  
Ste 247City State Zip Code  
Arlington VA 22209

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4600

Amount Incurred This Period

6263.19

Payment This Period

0.00

Outstanding Balance at Close of This Period

6263.19

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Liz Mair**

Nature of Debt (Purpose):

Advance for Independent Expenditures (3/22  
Primaries) (See Sch. E Memo Entries)Mailing Address 1200 Nash St  
Ste 247City State Zip Code  
Arlington VA 22209

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4653

Amount Incurred This Period

750.61

Payment This Period

0.00

Outstanding Balance at Close of This Period

750.61

1) **SUBTOTALS** This Period This Page (optional)..... ►

7963.15

2) **TOTALS** This Period (last page this line number only)..... ►

19504.54

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

19504.54

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 13 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>MAKE AMERICA AWESOME</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00594176		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <b>Alpha Media LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">03</span> / <span style="border: 1px solid black; padding: 2px;">10</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>		
Mailing Address 331 Fulton St Ste 1200			Amount <span style="border: 1px solid black; padding: 2px;">2195.00</span>		
City Peoria		State IL	Zip Code 61602		Transaction ID : <b>SE.4584</b>
Purpose of Expenditure Advertising - Radio (Reported as WIRL \$495, WMDB \$900, WPBG \$800 on 24-Hour)		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate DONALD J TRUMP			Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>IL</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">0.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Facebook</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">03</span> / <span style="border: 1px solid black; padding: 2px;">11</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>		
Mailing Address 1 Hacker Way			Amount <span style="border: 1px solid black; padding: 2px;">300.42</span>		
City Menlo Park		State CA	Zip Code 94025		Transaction ID : <b>SE.4592</b>
Purpose of Expenditure Advertising - Digital		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate DONALD J TRUMP			Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>IL</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">0.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Chris Marston</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">20</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 14 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>MAKE AMERICA AWESOME</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00594176	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Facebook</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>03 / 11 / 2016</b>	
Mailing Address 1 Hacker Way		Amount <b>300.42</b>		
City Menlo Park	State CA	Zip Code 94025	Transaction ID : <b>SE.4595</b>	
Purpose of Expenditure Advertising - Digital		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>MO</b>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Facebook</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>03 / 11 / 2016</b>	
Mailing Address 1 Hacker Way		Amount <b>112.66</b>		
City Menlo Park	State CA	Zip Code 94025	Transaction ID : <b>SE.4596</b>	
Purpose of Expenditure Advertising - Digital		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NC</b>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>0.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston

[Electronically Filed]

Date

MM / DD / YYYY  
**04 / 20 / 2016**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 15 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>MAKE AMERICA AWESOME</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00594176       </div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name of Payee <b>Facebook</b>			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 03 / 11 / 2016</div> </div>		
Mailing Address    1 Hacker Way			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">37.54</div>		
City                                  State                                  Zip Code Menlo Park                                  CA                                  94025		<b>Transaction ID : SE.4598</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> </div>			
Purpose of Expenditure Advertising - Digital		Category/Type		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> </div>	
Name of Federal Candidate <b>DONALD J TRUMP</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶					
Full Name of Payee <b>Facebook</b>			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 03 / 15 / 2016</div> </div>		
Mailing Address    1 Hacker Way			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">301.31</div>		
City                                  State                                  Zip Code Menlo Park                                  CA                                  94025		<b>Transaction ID : SE.4602</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> </div>			
Purpose of Expenditure Advertising - Digital		Category/Type		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> </div>	
Name of Federal Candidate <b>DONALD J TRUMP</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>UT</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶					
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶         </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div> </div>					
<div style="display: flex; justify-content: space-between;"> <div> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶         </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div>					
<div style="display: flex; justify-content: space-between;"> <div> <b>(c) TOTAL</b> Independent Expenditures..... ▶         </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Chris Marston</u>			Date <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 20 / 2016</div> </div>		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 16 OF 20  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>MAKE AMERICA AWESOME</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00594176	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>				
Full Name of Payee <b>Facebook</b>			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 1 Hacker Way			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">15</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City Menlo Park		State CA	Zip Code 94025	Amount <span style="border:1px solid black; padding:2px;">200.87</span>
Purpose of Expenditure Advertising - Digital		Category/Type <span style="border:1px solid black; padding:2px;"></span>		Transaction ID : <b>SE.4603</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>
Name of Federal Candidate DONALD J TRUMP			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">0.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>Facebook</b>			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 1 Hacker Way			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">17</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City Menlo Park		State CA	Zip Code 94025	Amount <span style="border:1px solid black; padding:2px;">149.06</span>
Purpose of Expenditure Advertising - Digital		Category/Type <span style="border:1px solid black; padding:2px;"></span>		Transaction ID : <b>SE.4606</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>
Name of Federal Candidate DONALD J TRUMP			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">0.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<span style="border:1px solid black; padding:2px;">0.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶			<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures.....▶			<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Chris Marston			[Electronically Filed]	
Signature			Date <span style="border:1px solid black; padding:2px;">04</span> / <span style="border:1px solid black; padding:2px;">20</span> / <span style="border:1px solid black; padding:2px;">2016</span>	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 17 OF 20  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>MAKE AMERICA AWESOME</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00594176</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>			
Full Name of Payee <b>Facebook</b>		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100%;"></div> 99.37	
Mailing Address 1 Hacker Way		<b>Transaction ID : SE.4607</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>	
City Menlo Park			
State CA		Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>AZ</u>	
Zip Code 94025			
Purpose of Expenditure Advertising - Digital		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Category/ Type			
Name of Federal Candidate DONALD J TRUMP		Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 100%;"></div> 0.00	
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			
Full Name of Payee <b>LB Sports Production LLC</b>		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100%;"></div> 483.00	
Mailing Address 10781 S Main St		<b>Transaction ID : SE.4576</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>	
City Chatham			
State IL		Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>IL</u>	
Zip Code 62629			
Purpose of Expenditure Advertising - Radio (Reported as WPWQ on 24-Hour Report)		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Category/ Type			
Name of Federal Candidate DONALD J TRUMP		Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 100%;"></div> 0.00	
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			
<div style="display: flex; justify-content: space-between;"><div style="width: 60%;">(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶</div><div style="width: 35%; text-align: right;"><div style="display: inline-block; border-bottom: 1px solid black; width: 100%;"></div> 0.00</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶</div><div style="width: 35%; text-align: right;"><div style="display: inline-block; border-bottom: 1px solid black; width: 100%;"></div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(c) <b>TOTAL</b> Independent Expenditures..... ▶</div><div style="width: 35%; text-align: right;"><div style="display: inline-block; border-bottom: 1px solid black; width: 100%;"></div></div></div>			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  <div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="width: 40%;">Signature  <i>Chris Marston</i></div><div style="width: 20%; text-align: center;">[Electronically Filed]</div><div style="width: 40%; text-align: right;">Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> 04 / 20 / 2016</div></div>			

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 18 OF 20  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>MAKE AMERICA AWESOME</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00594176	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>				
Full Name of Payee <b>NCC Media</b>			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 7501 Wisconsin Ave			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">10</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City Bethesda		State MD	Zip Code 20814	Amount <span style="border:1px solid black; padding:2px;">340.00</span>
Purpose of Expenditure Advertising - TV		Category/ Type <span style="border:1px solid black; padding:2px;"></span>		Transaction ID : <b>SE.4580</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>
Name of Federal Candidate DONALD J TRUMP			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IL</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">0.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>NCC Media</b>			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 7501 Wisconsin Ave			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">10</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City Bethesda		State MD	Zip Code 20814	Amount <span style="border:1px solid black; padding:2px;">340.00</span>
Purpose of Expenditure Advertising - TV		Category/ Type <span style="border:1px solid black; padding:2px;"></span>		Transaction ID : <b>SE.4581</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>
Name of Federal Candidate DONALD J TRUMP			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MO</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">0.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<span style="border:1px solid black; padding:2px;">0.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶			<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures.....▶			<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Chris Marston			[Electronically Filed]	
Signature			Date <span style="border:1px solid black; padding:2px;">04</span> / <span style="border:1px solid black; padding:2px;">20</span> / <span style="border:1px solid black; padding:2px;">2016</span>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 19 OF 20  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>MAKE AMERICA AWESOME</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00594176
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>STARadio Corp</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>03 / 10 / 2016</b>	
Mailing Address 329 Maine			Amount 334.05	
City Quincy	State IL	Zip Code 62301	Transaction ID : <b>SE.4574</b>	
Purpose of Expenditure Advertising - Radio (Reported as WTAD \$393 on 24-Hour)		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IL</b>	
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Withers Broadcasting Companies</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>03 / 10 / 2016</b>	
Mailing Address 3501 Braodway St			Amount 596.00	
City Mt Vernon	State IL	Zip Code 62864	Transaction ID : <b>SE.4590</b>	
Purpose of Expenditure Advertising - Radio (Reported as WTAO \$190, WZZL \$406 on 24-Hour)		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>MO</b>	
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston

[Electronically Filed]

Date

MM / DD / YYYY  
**04 / 20 / 2016**

Signature

Full Name of Payee <b>WRIK/WJLI Radio</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>03 / 10 / 2016</div> </div>	
Mailing Address 5101 Hinkleville Rd Ste 375		Amount <div> <div>Amount</div> <div>335.00</div> </div>		
City Paducah	State KY	Zip Code 42001	<b>Transaction ID : SE.4578</b> Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div></div> </div>	
Purpose of Expenditure Advertising - Radio (Reported as WJLI on 24-Hour Report)		Category/ Type		
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	
District: _____ State: <u>IL</u>				
Calendar Year-To-Date Per Election for Office Sought		<div> <div>Amount</div> <div>0.00</div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	<div>0.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	<div></div>
(c) <b>TOTAL</b> Independent Expenditures.....	▶	<div>0.00</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date \_\_\_\_\_

Signature \_\_\_\_\_

The image shows three digital displays. The first display shows '04' with 'M' above the '0' and 'M' above the '4'. The second display shows '20' with 'D' above the '2' and 'D' above the '0'. The third display shows '2016' with 'Y' above the '2', 'Y' above the '0', 'Y' above the '1', and 'Y' above the '6'.